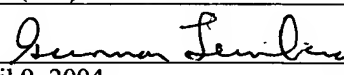


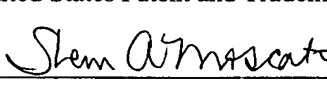


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| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence after initial filing) |  | Application Number     | 10/072,404              |
|   |  | Filing Date            | February 8, 2002        |
|   |  | First Named Inventor   | Paul H. Steen           |
|   |  | Group Art Unit         | 1725                    |
|   |  | Examiner Name          | Len Tran                |
| Total Number of Pages in This Submission  |  | Attorney Docket Number | 19603/3810 (CRF D-2693) |

| ENCLOSURES (check all that apply)   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request (one-month)<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> A copy of the Notice to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Declaration and Power of Attorney<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Application Data Sheet<br><input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures<br><input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks   | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |
|--|---|
| Firm or Individual name                    | Gunnar G. Leinberg, Esq.<br>Nixon Peabody LLP<br>Clinton Square, P.O. Box 31051<br>Rochester, New York 14603-1051<br>Telephone: (585) 263-1014<br>Fax: (585) 263-1600 |
| Signature                                  |  Registration No. 35,584   |
| Date                                       | April 9, 2004   |

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| April 9, 2004<br>Date   | <br>Signature<br>Sherri A. Moscato<br>Typed or printed name |